TITLE 405 OFFICE OF THE SECRETARY OF FAMILY AND SOCIAL SERVICES

Final Rule

LSA Document #06-5(F)

DIGEST

Amends <u>405 IAC 5-14-1</u> and <u>405 IAC 5-14-3</u> to place limitations on dental services for adults that are in accordance with HEA 1001-2005, SECTION 239, and amends rules regarding coverage for diagnostic services. Effective 30 days after filing with the Publisher.

405 IAC 5-14-1; 405 IAC 5-14-3

SECTION 1. 405 IAC 5-14-1 IS AMENDED TO READ AS FOLLOWS:

405 IAC 5-14-1 Policy

Authority: IC 12-8-6-5; IC 12-15-1-10; IC 12-15-1-15; IC 12-15-21-2; IC 12-15-21-3

Affected: IC 12-13-7-3; IC 12-15-13-6

- Sec. 1. (a) Medicaid reimbursement is available only for those dental services listed in section 2 of this rule subject to the limitations set out in this rule.
- (b) For those recipients twenty-one (21) years of age and over, covered services routinely provided in a dental office will be limited to six hundred dollars (\$600) per recipient, per twelve (12) month period. This limit precedes all other limits within this rule. The procedure codes that will be included within the limitation:
 - (1) will be listed and published in a provider bulletin; and
 - (2) may be updated by the office as needed.

A provider bulletin issued under this subsection shall be effective no earlier than permitted under IC 12-15-13-6.

- (c) For those recipients twenty-one (21) years of age and over, all covered services will require prior authorization except the following:
 - (1) Diagnostic and preventative services.
 - (2) Direct restorations.
 - (3) Treatment of lesions.
 - (4) Periodontal services for the following immuno-compromised individuals:
 - (A) Transplant patients.
 - (B) Pregnant women.
 - (C) Diabetic patients.
 - (5) Extractions.
 - (6) Emergency and trauma care.

(Office of the Secretary of Family and Social Services; <u>405 IAC 5-14-1</u>; filed Jul 25, 1997, 4:00 p.m.: 20 IR 3319; readopted filed Jun 27, 2001, 9:40 a.m.: 24 IR 3822; filed Dec 13, 2002, 4:00 p.m.: 26 IR 1546; filed Aug 17, 2007, 3:23 p.m.: <u>20070912-IR-405060005FRA</u>)

SECTION 2. 405 IAC 5-14-3 IS AMENDED TO READ AS FOLLOWS:

405 IAC 5-14-3 Diagnostic services

Authority: IC 12-8-6-5; IC 12-15-1-10; IC 12-15-1-15; IC 12-15-21-2; IC 12-15-21-3

Affected: IC 12-13-7-3; IC 12-15

Sec. 3. Medicaid reimbursement is available for diagnostic services, including initial and periodic evaluations, prophylaxis, radiographs, and emergency treatments, with the following limitations:

- (1) Either **a** full mouth series radiographs or panorex is limited to one (1) set per recipient every three (3) vears.
- (2) Bitewing and intraoral radiographs are limited to one (1) set per recipient every twelve (12) months. One

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- (1) set of bitewings is defined as a total of either:
 - (A) four (4) single horizontal films; or
 - (B) seven (7) to eight (8) vertical films.
- (3) Intraoral radiographs are limited to one (1) first film and seven (7) additional films, per recipient every twelve (12) months.
- **(4)** Temporomandibular joint arthograms, arthrograms, other temporomandibular films, tomographic surveys, and cephalometric films are no longer covered in a dental office.
- (3) (5) A comprehensive or detailed oral evaluation is limited to one (1) per lifetime, per recipient, per provider, with an annual limit of two (2) per recipient.
- (4) (6) A periodic or limited oral evaluation is limited to one (1) every six (6) months, per recipient, any provider.
- (5) (7) Mouth gum cultures and sensitivity tests are not covered.
- (6) (8) Oral hygiene instructions:
 - (A) are reimbursed in the Medicaid payment allowance for diagnostic services; and
 - (B) may not be billed separately to Medicaid.
- (7) (9) Payment for the writing of prescriptions:
 - (A) is included in the reimbursement for diagnostic services; and
 - (B) may not be billed separately to Medicaid.

(Office of the Secretary of Family and Social Services; <u>405 IAC 5-14-3</u>; filed Jul 25, 1997, 4:00 p.m.: 20 IR 3320; readopted filed Jun 27, 2001, 9:40 a.m.: 24 IR 3822; filed Apr 16, 2003, 10:50 a.m.: 26 IR 2863; filed Aug 17, 2007, 3:23 p.m.: <u>20070912-IR-405060005FRA</u>)

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